

# June 2019 Report: Rhode Island Review of Overdose Accidental Deaths (ROAD) Team

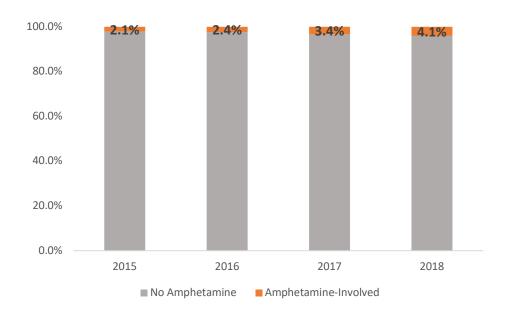
The ROAD Team at the Rhode Island Department of Health (RIDOH) convened in June 2019 to conduct its overdose death review process. Data findings from Rhode Island's State Unintentional Drug Overdose Reporting System (SUDORS) offered insight into emerging drug overdose death trends and themes.

The ROAD Team recommends several systemic and community initiatives that can be implemented by state and local partners to prevent the incidence of drug overdose in Rhode Island.

#### **Data Trends**

- Nationwide, accidental drug overdose deaths involving amphetamines (prescribed or illicit stimulants that are used to treat attention deficit hyperactivity disorder, narcolepsy, and obesity), particularly methamphetamine, have been increasing. Methamphetamine is a strong, highly addictive stimulant that affects the central nervous system and most times is used illicitly.
- There were 13 (4.1%) accidental drug overdose deaths where amphetamines contributed to cause of death in 2018.
- Although the numbers are still quite small, this represents a 64% increase since 2015 in the
  proportion of accidental drug overdose deaths where amphetamines contributed to the cause of
  death.

Accidental Drug Overdose Deaths in Rhode Island 2015-2018: Proportion Where Amphetamines Contributed to Cause of Death



**Data source:** RIDOH's Office of State Medical Examiners, <u>Drug Overdose Deaths</u>; updated 6/26/2019. **Notes:** Data reflect accidental drug overdose deaths from all drugs occurring within Rhode Island and does not necessarily reflect all Rhode Island residents. Substance categories are not mutually exclusive, so more than one substance may have contributed to cause of death.

### **Emergent Theme: Increase in Methamphetamine**

- From 2014 to 2018, 41% of the accidental drug overdose deaths in Rhode Island where amphetamines contributed to the cause of death involved methamphetamine.
- In 2018, the State Health Laboratories identified methamphetamine in seized drugs 187 times. This represents a significant increase from 2017 when methamphetamines were identified 51 times. This data indicate an increased supply of methamphetamines in Rhode Island.

#### **ROAD Team Recommendations for Community Overdose Prevention**

## **Systemic Recommendations**

- Promote and offer the Department of Behavioral Healthcare, Developmental Disabilities, and Hospital's (BHDDH) TRIAD training to providers to ensure providers take an integrated, wholeperson approach to treating patients and increase awareness of potential co-occurring disorders.
- Increase coordination of care between mental health providers and substance use treatment providers through increased training, education, and systems changes that improve inter-agency communication.
- Increase education and outreach to all providers about the importance of checking the Rhode Island Prescription Drug Monitoring Program (PDMP), prior to prescribing, to check for cooccurring disorders, especially when treating a patient for a mental health diagnosis.
- Increase education and awareness to providers about BH Link resources to ensure referrals to the program are standard practice for any patient who needs increased level of care.
- Promote RIDOH recommendations for giving naloxone to any person who is being prescribed buprenorphine.

#### **Community Recommendations**

- Develop educational and support resources for family, friends, and/or those who have witnessed an overdose to manage the aftermath and trauma of the death and the increased risk of overdose in this population, particularly for those who use drugs together.
- Increase overdose response education to the public and people who use drugs recreationally that includes naloxone distribution and CPR training.
- Broaden communication campaigns to include more general messaging about the risks of using drugs alone and the importance of carrying naloxone.
- Conduct targeted outreach to specific high-risk populations, such as men who have sex with men (MSM) and people who use methamphetamine.